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| | | | |
|--------------|--|------------------|---------------|
| APPLICANT(S) | Ellis A. PINDER | GROUP ART UNIT: | 2661 |
| APPLN. NO.: | 10/649,445 | EXAMINER: | Erika A. GARY |
| FILED: | August 26, 2003 | Confirmation No. | 5762 |
| TITLE: | METHOD AND APPARATUS TO ENSURE INTRINSICALLY SAFE OPERATION OF A COMMUNICATION DEVICE | | |
| DOCKET DATE | January 29, 2006 | | |

Enclosed herewith, please find the following documents for filing in the above-identified application:

| | |
|-----------------------|------------|
| Transmittal Form | - 1 page |
| Amendment After Final | - 12 pages |

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Vernice V. Freebourn /Vernice V. Freebourn January 4, 2006 /Date

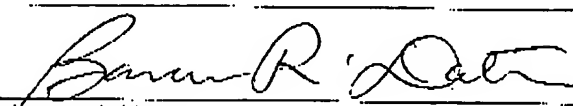
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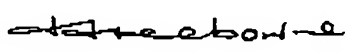
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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 10/649,445 |
| | | Filing Date | August 26, 2003 |
| | | First Named Inventor | Ellis A. Pinder |
| | | Group Art Unit | 2661 |
| | | Examiner Name | Erika A. Gary |
| Total Number of Pages in this Submission | 15 | Attorney Docket Number | CM06341J |

| ENCLOSURES | | (check all that apply) |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____ | <input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC {Appeal Notice, Brief, Reply Brief} <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) Facsimile Transmittal Sheet |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|------------------|--------|
| Firm or Individual | Barbara R. Doutre | Registration No. | 39,505 |
| Signature |  | | |
| Date | January 4, 2006 | | |

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| Typed or printed name | Vernice V. Freebourn |
| Signature |  |
| Date | January 4, 2006 |

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